



Suzanne Steab< suzannesteab@utah.gov>

RE: Liability Insurance Certificate

1 message

Kirk Nicholes knicholes@altoncoal.com

Fri, May 31, 2013 at 12:55 PM

To: Daron Haddock daronhaddock@utah.gov

Cc: Karl Houskeeper <karlhouskeeper@utah.gov>, Suzanne Steab <suzannesteab@utah.gov>

All,

Here is the revised Certificate of Liability a copy of which will be available at the mine.

From: Daron Haddock [mailto:daronhaddock@utah.gov]

Sent: Friday, May 31, 2013 8:35 AM

To: Kirk Nicholes

Cc: Karl Houskeeper; Suzanne Steab Subject: Liability Insurance Certificate

Kirk,

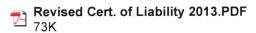
We recently recieved the updated Certificate of Liability Insurance for the Coal Hollow Mine (see attached). We could not identify that the coverage includes the use of explosives (usually shown as XCU on the certificate). The Insurance policy must provide for personal injury and property damage protection that includes the use of explosives as required by R645-301-890.100. Please ensure that your insurance provides for the required explosives coverage. Our inspector will be checking for this during the next inspection. You should have the appropriate certificate on hand to avoid enforcement action. Thank you. Daron

Daron R. Haddock

Coal Program Manager

Utah Division of Oil, Gas & Mining

(801) 538-5325





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 5/30/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT ROSEMARY Turner NE (740) 622-1796 (A/C, Noj: (740) 622-1798 PHONE Jacobs Vanaman Agency, Inc. (A)C No. Ext): (740) 622-1796 E-MAIL ADDRESS: Rosie. Turner@jva-ins.com 530 MAIN ST. PO BOX 370 INSURER(S) AFFORDING COVERAGE NAIC # OH 43812 INSURER A American Mining Insurance Co COSHOCTON 10677 INSURED INSURER B: Cincinnati Insurance Co. Alton Coal Development, LLC, Kane Mining, LLC, INSURER C: Admiral Insurance Co P O Box 1058 INSURER D : 507 Main Street INSURER E : Coshocton OH 43812 INSURER F **REVISION NUMBER: COVERAGES** CERTIFICATE NUMBER:CL1353002733 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY) LIMITS TYPE OF INSURANCE POLICY NUMBER 1,000,000 GENERAL LIABILITY **EACH OCCURRENCE** DAMAGE TO RENTED PREMISES (Ea occurrence) 100,000 COMMERCIAL GENERAL LIABILITY 4/23/2013 12/10/2013 10,000 MED EXP (Any one person) A CLAIMS-MADE X OCCUR 1,000,000 X \$2000 Deductible on PERSONAL & ADV INJURY \$ 2,000,000 Property Damage GENERAL AGGREGATE 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG s X POLICY PROs OMBINED SINGLE LIMIT AUTOMOBILE LIABILITY 1,000,000 (Ea accident) BODILY INJURY (Per person) Х \$ ANY AUTO В ALL OWNED SCHEOULED 11/17/2011 11/17/2014 BODILY INJURY (Per accident) \$ AUTOS NON-OWNED PROPERTY DAMAGE HIRED AUTOS AUTOS (Per accident) \$ 1,000,000 Underinsured motorist UMBRELLA LIAB X 5,000,000 s OCCUR EACH OCCURRENCE 5,000,000 **EXCESS LIAB** х CLAIMS-MADE **AGGREGATE** 4/23/2013 12/10/2013 DED X RETENTIONS 10,000 \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY X WC STATU-TORY LIMITS ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? 1,000,000 E.L. EACH ACCIDENT N/A 9/1/2012 9/1/2013 (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE 1,000,000 f yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 1,000,000 12/10/2012 12/10/2013 C Pollution Liability \$3,000,000 w/\$25,000 Ded DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Permit # C0250005 Blasting coverage is provided for the insured's operations per General Liability form CG00 01 0413. **CERTIFICATE HOLDER** CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Utah Division of Oil, Gas and Mining P O Box 145801 AUTHORIZED REPRESENTATIVE Salt Lake City, UT 84114 Rex Snyder/RFT

ACORD 25 (2010/05)